

<b>CLAIMS ONLY</b>	SERIAL NO.	FILING DATE
APPLICANT(S)		

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		/				
4		/				
5	/					
6	/	/				
7	/					
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44		/				
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47	/					
48	/	/				
49		/				
50		/				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

  

	* IND.		* DEP.		* IND.		* DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		/						
52		/						
53		/						
54		/						
55		/						
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87		/						
88		/						
89		⓪						
90								
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92								
93								
94								
95								
96								
97								
98								
99								
100								
TOTAL IND.	50	↓		↓		↓		↓
TOTAL DEP.	33	↓		↓		↓		↓
TOTAL CLAIMS	89							

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS